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0010/PTO
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U.S. Department of Commerce
Patent and Trademark Office

DECLARATION

Declaration Submitted with Initial Filing

OR Declaration Submitted After Initial Filing

Attorney Docket Number LP-1799

First Named Inventor DAUM

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

UNSATURATED OLIGOPHENOL CYANATES

(Title of the Invention)

the specification of which

is attached hereto

OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application

Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § .56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached? YES	Copy Attached? NO
PCT/EP99/09477	International	08/09/1999	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
98202692.4	Europe	08/11/1998	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
60/096,523	U.S. Provisional	08/12/1998	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/>	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>	

DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations 1.56 which became available between the filing date of the prior application and the national or PCT filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
60/096,253	PCT/EP99/05757	08/09/1999 08/12/1998	

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name	Fisher, Christen & Sabol			Payor Number (if applicable)	<input type="text"/>
Name	Registration Number	Name		Registration Number	
Virgil H. Marsh	23,083				
Kara M. Armstrong	38,234				
<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.					

<input checked="" type="checkbox"/> Please direct all correspondence to:	Name	Virgil H. Marsh		
Address	Fisher, Christen & Sabol			
Address	Suite 1401, 1725 K Street, N.W.			
City	Washington	State	D.C.	Zip 20006
Country	USA	Telephone	(202)659-2000	Fax (202)659-2015
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				

Name of Sole or First Inventor:				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name	Ulrich	Middle Initial		Family Name	DAUM	Suffix
Inventor's Signature	<i>Ulrich</i>			<i>Daum</i>		
Date				01/26/01		
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Post Office Address:	Chöpfliweg 17					
City	Hofstetten	Postal Code	CH-4114	Country	Switzerland	Applicant Authority
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto						

CHX

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DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <i>Alessandro</i>	Middle Initial		Family Name <i>FALCHETTO</i>	Suffix		Date <i>31.01.01</i>	
Inventor's Signature <i>Alessandro Falchetto</i>							
Residence: City <i>Domodossola</i>	Country	Italy		Citizenship	Italy		
Post Office Address: Via Leopardi 2/c							
City <i>Domodossola</i>	Postal Code <i>I-28845</i>	Country <i>Italy</i>		Applicant Authority			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Middle Initial		Family Name	Suffix		Date	
Inventor's Signature							
Residence: City	Country			Citizenship			
Post Office Address:							
City	Postal Code	Country		Applicant Authority			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Middle Initial		Family Name	Suffix		Date	
Inventor's Signature							
Residence: City	Country			Citizenship			
Post Office Address:							
City	Postal Code	Country		Applicant Authority			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Middle Initial		Family Name	Suffix		Date	
Inventor's Signature							
Residence: City	Country			Citizenship			
Post Office Address:							
City	Postal Code	Country		Applicant Authority			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Middle Initial		Family Name	Suffix		Date	
Inventor's Signature							
Residence: City	Country			Citizenship			
Post Office Address:							
City	Postal Code	Country		Applicant Authority			

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